



Hospital Corpsman 1st Class Darrius Cooley, a Laurel, Miss. native, instructed 15 Navy corpsmen during the seven-week Hospital Corpsmen Trauma Training in Chicago, Illinois. (U.S. Navy photo by Douglas H Stutz)

NAVAL HOSPITAL BREMERTON SAILOR PREPARES HOSPITAL CORPSMEN FOR COMBAT TRAUMA

By Douglas H. Stutz

Naval Hospital Bremerton Public Affairs

For many hospital corpsmen, working in a war zone setting is a deployment reality.

Real-world experience helps train them to work in these challenging trauma environments.

Naval Hospital Bremerton's Hospital Corpsman 1st Class Darrius A. Cooley was one of eight instructors teaching and supervising 15 corpsmen from mid-April to June 1, 2018 during the Hospital Corpsman Trauma Training.

The initiative is a unique partnership between Navy Medicine, Capt. James A. Lovell Federal Health Care Center (Lovell FHCC) and John H. Stroger Jr. Hospital of Cook County to improve the knowledge, skills, and abilities of corpsmen.

"This training was extremely valuable to any Sailor who may find themselves in a trauma environment. This training can almost guarantee that when they eventually encounter a trauma patient on the battlefield or on board ship, they will be prepared to provide medical care. We focused on real world trauma regardless of the environment," said Cooley, a Laurel, Mississippi native with Fleet Marine Force and Surface Warfare designations.

The training consisted of a week's worth of classroom training at Lovell FHCC, followed by six weeks of trauma training at Cook County, focusing on Trauma Resuscitation, Trauma Intensive Care Unit, Burn Unit, and the Emergency Department.

Cooley and his students witnessed patients arriving at all hours. Many were bloodied, some were bandaged – all were battered and bruised. They were wounded from stabbings, automotive casualties and gunshots.

"The primary focus of the training was to provide Sailors with the skills and clinical knowledge needed to provide medical care in a complete trauma environment. The opportunities provided were world-class. The amount of trauma opportunities far surpassed any training I had been exposed to prior to this temporary assigned duty," Cooley said.

Cooley, NHB's Directorate of Administration leading petty officer and surface force independent duty corpsman, knows firsthand of what he teaches. He has deployed on operational tours at sea, along with multiple combat tours in Iraq in 2003 and 2004.

During the seven-week HM Trauma Training, Cooley's typical day had him working 12-hour shifts from the initial didactic portion into the hands-on, hospital rotation phase. From classroom to clinical, his entire focus was on his students, responsible along with the other instructors, for the day-to-day coordination of all medical topics during the didactic phase.

"The curriculum held at FHCC included IV insertion, Basic Life Support and Tactical Casualty Care, to name a few. At the hospital, the trauma rotations consisted of shifts in the Trauma Resuscitation Area, Emergency Department, Burn Intensive Care Unit and Trauma Intensive Care Unit," said Cooley, noting that the other instructors were acute care nurses, clinical care nurses, and intensive care nurses.

Corpsmen also went through the Tactical Combat Casualty Care Course in the FHCC Simulation Center, featuring an immersive, interactive environment that realistically simulated conditions on an urban battlefield.

"The training was focused on real-world trauma regardless of the environment," said Cooley.

In the hospital, Cooley and the other instructors functioned as medical providers and extended members of the hospital staff during their shift rotations. The students worked alongside civilian counterparts as well as Navy peers.

"When dealing with any trauma care patient, the goal is to identify and treat the life-threatening conditions, while still managing similar medical concerns with other patients," Cooley said, adding that the

students were taught to work as a team, rapidly assess other needs such as supplies and medical instruments required, all while trying to keep cool under enormous pressure to save someone's life.

"The most gratifying moment during the entire training evolution was when we had multiple trauma cases come in at once and every Sailor was able to use the training they received to provide continuous care during a staff shortage. During that moment, we were all like, 'hey, the training actually does work,'" related Cooley.

The benefits of the training included improved readiness and clinical competency, increased corpsmen knowledge, skills, and abilities and enhanced future partnership framework. The value of teamwork was also continually emphasized.

"Team dynamics were an important part of our clinical rotations. Teamwork was learned in the controlled (classroom) environment and sharpened in the actual trauma environment. Teamwork was an important skill used throughout every facet of the trauma center. Everything in the trauma environment requires teamwork," Cooley stated.

That teamwork and training also included guidance on the uncomfortable reality if – and when – a trauma patient didn't make it. Death in a simulation lab is academic. A fatality in real-life is a stark reminder that caring for severely wounded casualties can be an emotional rollercoaster.

"Unfortunately, as a team we experienced multiple deaths during our trauma rotations. However, I am extremely proud of how our Sailors conducted themselves during those events. They handled every situation with compassion and caring regardless of the situation. I am extremely proud to have worked with this group of Sailors," said Cooley.

The feedback from students, as well as instructors, has been positive.

"Overall, the opportunity to train and mentor the next generation of Navy Medicine professionals was an amazing opportunity that I will remember for the rest of my life," Cooley asserted.

As will those trauma care patients they worked to save.